State of Rhode Island Department of Administration

Office of Accounts and Control

One Capital Hill, 4th Floor, Providence, RI 02908

REPORT OF FIXED ASSETS TRANSFERS

RELEASING AGENCY (division)			RECEIVING AGENCY (division)					
FUND/	AGENCY:		FUND/AGENCY:					
NAME:			NAME:					
ADDRESS:			ADDRESS:					
CODE 26	A BARCODE	DESCRIPTION OF PROPERTY			BUILDING NUMBER	LINE ITEM	A & B VERIFIED	
RELEASING AGENCY			<u> 1</u>	RECEIVING AGENCY				
Signature — Date			Signature	Signature Date				
Title			Title **by signing, it has been verified that the above items are true and correct**					